

REQUEST FOR OUT-OF-AGENCY TRAINING				DATE
PART I—IDENTIFICATION AND TRAINING INFORMATION				
NAME OF EMPLOYEE		SSN		NAME AND MAILING ADDRESS OF TRAINING FACILITY
TITLE		GRADE AND SERIES		
ORGANIZATION AND LOCATION			TRAINING PERIOD	
			FROM: TO:	
DIRECT HOURS OF INSTRUCTION				
FOR NONGOVERNMENT TRAINING ONLY		TRAINING AGREEMENT		EMPLOYEE <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT HAD MORE THAN ONE YEAR NON-GOVERNMENT TRAINING IN CURRENT TEN YEAR PERIOD OF CONTINUOUS OR NON-CONTINUOUS FEDERAL CIVILIAN SERVICE. IF MORE THAN ONE YEAR GIVE
EMPLOYEE <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT HAD ONE YEAR OR MORE CURRENT CONTINUOUS FEDERAL CIVILIAN SERVICE. IF NOT, GIVE		<input type="checkbox"/> IS <input type="checkbox"/> IS NOT REQUIRED. IF REQUIRED, GIVE DATE EXECUTED. (See reverse of form)		
DATE WAIVER APPROVED		DATE EXECUTED		
DATE WAIVER OBTAINED				
TITLE AND BRIEF DESCRIPTION OF COURSE OR TRAINING PROGRAM				
JUSTIFICATION FOR TRAINING (Show specific relationship of training to job requirements)				
CATEGORY OF TRAINING, e.g., MANDATORY, JOB-REQUIRED, HIGHLY DESIRABLE, PERFORMANCE IMPROVEMENT, CAREER DEVELOPMENT				
PART II—ADDITIONAL TRAINING EXPENSES (Exclusive of Salary, Pay, or Compensation)				
A. DIRECT COSTS			B. INDIRECT COSTS	
1. Tuition, Matriculation or Registration Fees		\$	1. Travel	
2. Library or Lab Services		\$	2. Per Diem	
3. Purchase or Rental of Books, Materials & Supplies		\$	3. Transportation of Immediate Family, etc.	
4. Other		\$	4. TOTAL INDIRECT COSTS	
TOTAL DIRECT COSTS		\$	TOTAL ALL COSTS	
APPROVALS				
SIGNATURE AND TITLE OF REQUESTOR		SIGNATURE AND TITLE (Operational approval)		DATE
PERSON TO CONTACT		EXT.	SIGNATURE AND TITLE (Administrative approval)	
			DATE	
PART III—SUMMARY OF TRAINING COMPLETED (To be Completed by Supervisor or Training Officer)				
TRAINING WAS COMPLETED <input type="checkbox"/> SATISFACTORILY <input type="checkbox"/> UNSATISFACTORILY (Provide summary statement of circumstances for incomplete training and action taken.) (Attach additional sheet if needed).				
SIGNATURE		TITLE		DATE